

PERSONAL CERTIFICATION

(This blank form may be reproduced)

Individual completing form check below:

Officer/Partner/Member/Owner _____
Director/Trustee _____
Stockholder _____
Individual Licensee _____
Employee _____

1. Name _____
2. Residence Address _____
3. Business Address _____
4. Date of Birth _____ Place of Birth _____
5. Telephone No. (____) _____ Social Security Number _____

NOTE: Disclosure of Social Security Numbers is mandatory for child support enforcement purpose. The authority to compel disclosure of Social Security Numbers is established by P.L. 1996, c.7 and N.J.A.C. 3:1-20.

6. Employment History for Five Year Period Preceding the Date of This Application

Date		(Include present employment as well as preceding five years)	
From	To	Name, Location & Type of Business	Position & Nature of Duties

Attach additional sheet if more space is needed to complete employment history

7. Are you a citizen of the United States? Yes _____ No _____. If no, in what country do you hold citizenship? _____. If you presently reside in the United States without citizenship, provide a copy of your alien registration status document.
8. Have you ever been arrested, indicted, convicted or pleaded “nolo contendere” to any offense, crime, or misdemeanor (other than a motor vehicle violation) in this state, any other state, or any federal jurisdiction? Yes _____ No _____ **If “yes”, complete ARREST FORM found on www.njdobi.org**
9. Have any fines or penalties been levied against you by any state, municipality or federal agency? Yes _____ No _____
10. Have you been involved in any material litigation during the five-year period prior to application? Yes _____ No _____
11. Are you now under investigation in this state, any other state, or federal jurisdiction? Yes _____ No _____
12. Have you ever held any license issued by the Department of Banking and Insurance? Yes _____ No _____
13. Have you ever had a license or right to engage in any business which is the subject of this application or any other business or profession denied, revoked, suspended, otherwise restrained by any agency of this state, any other state, or by the federal government? Yes _____ No _____
14. Have you ever filed a petition in bankruptcy or reorganization or been affiliated with any entity that has filed a petition in bankruptcy or reorganization? Yes _____ No _____. If the answer is “yes”, attach a separate schedule providing complete details including dates of bankruptcy or reorganization proceedings and copies of all petitions, discharges, etc.
15. Are you the subject of an arrest warrant for failing to comply with court ordered child support obligations? Yes _____ No _____
Are you in arrears on such obligations for a period of six months or more? Yes _____ No _____.

For “Yes” responses, refer to the website for an explanation of supporting documentation requirements. Failure to provide the specific information requested will cause the application to be returned to you.

CERTIFICATION

I, the applicant, being duly sworn according to law depose and say that the answers set forth are true to the best of my knowledge and belief. This application is made for the purpose of inducing the issuance of a Banking License or an approval under an existing license, and I understand that any information withheld or which represents a material misstatement will constitute grounds for rejection of this application by the Commissioner of Banking and Insurance. This authorizes release to the New Jersey Department of Banking and Insurance any and all information pertaining to me, documentary otherwise, from all governmental agencies, federal, state and local, without exception, both foreign and domestic. A photostatic copy of this authorization will be considered as effective and valid as the original.

Print Name

Signature

Title

Date

Subscribed and sworn to before me

On this _____ day of

_____, 20____

Title